



**Campaign Finance Section
Financial Report**

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees, and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

Full Organization Name: Citizens for Bill Bell

Account Number: ***** Date of this Report: 01/15/2008

Reporting Period Start: 01/01/2007 Reporting Period End: 12/31/2007

Office: _____

Check the box that applies to this report:

| | | |
|------------------|---------------------|----------------------|
| Primary Election | <u> </u> 8-DAY | <u> </u> 30-DAY |
| General Election | <u> </u> 8-DAY | <u> </u> 30-DAY |
| Other Election | <u> </u> 8-DAY | <u> </u> 30-DAY |
| Special Election | <u> </u> 8-DAY | <u> </u> 30-DAY |

 X YEAR END

| | | | | |
|-----------------------------|-------------------|-----------------|---------------|-------|
| Final Organization Closing: | <u> </u> YES | <u> X </u> NO | Closing Date: | _____ |
| Amendment: | <u> </u> YES | <u> X </u> NO | | |

I authorize that all information included in this Financial Report package is accurate and correct. I agree to abide by all rules and regulations regarding Campaign Finance and the election process in the State of Delaware. I understand that representatives from the Office of the State Election Commissioner will perform an audit of all information provided on this report.

TREASURER SIGNATURE

DATE

CANDIDATE SIGNATURE

DATE



STATEMENT OF ACCOUNT BALANCE

| | | | | |
|---|-------|-------------------|--------------------|------------------|
| Account Number: | ***** | Reporting Period: | 01/01/2007 FROM | 12/31/2007 TO |
| 1. BEGINNING BALANCE (Ending Balance from last reporting period) | | | | \$176.51 |
| 2. RECEIPTS: | | | | |
| A. SCHEDULE A - TOTAL RECEIPTS | | | | \$6,600.00 |
| B. SCHEDULE C-1 - TOTAL IN-KIND RECEIPTS | | | | \$0.00 |
| C. SCHEDULE D-1 - TOTAL LOANS RECEIVED | | | | \$0.00 |
| D. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS RECEIVED | | | | \$0.00 |
| E. SUBTOTAL (Total of A,B,C,D) | | | | \$6,600.00 |
| 3. EXPENDITURES: | | | | |
| F. SCHEDULE B - TOTAL EXPENDITURES | | | | \$997.48 |
| G. SCHEDULE C-2 - TOTAL IN-KIND EXPENDITURES | | | | \$0.00 |
| H. SCHEDULE D-2 - TOTAL LOAN PAYMENTS | | | | \$0.00 |
| I. SCHEDULE E - TOTAL EXPENSE REIMBURSEMENTS PAID | | | | \$0.00 |
| J. SUBTOTAL (Total of F,G,H,I) | | | | \$997.48 |
| 4. ENDING BALANCE (Beginning Balance plus 2E minus 3J) | | | | \$5,779.03 |
| 5. VALUE OF NON-CASH ASSETS (From Schedule F) | | | | \$0.00 |
| 6. VALUE OF DISPOSED/TRANSFERRED ASSETS (From Schedule G) | | | | \$0.00 |
| 7. VALUE OF LOANS AT END OF PERIOD (Loan Balance From Schedule D-2) | | | | \$0.00 |
| 8. CLOSE OUT BALANCE (Must equal zero if committee closed) | | | | \$5,779.03 |



SCHEDULE A - TOTAL RECEIPTS

Account Number: ***** Reporting Period: 01/01/2007 12/31/2007
FROM TO

Itemize all receipts over \$100 for the reporting period. Receipts from sales of items must be itemized if they are over \$50. NOTE: If you receive funds from the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

RECEIPTS IN EXCESS OF \$100:

| Date Received | Contributor Name | Contributor Mailing Address | Aggregate Amount | Amount Received |
|---------------|-------------------------|--|------------------|-----------------|
| 12/01/2007 | Edwin S. Barlow | 800 East Ave New Castle DE 10720 | \$50.00 | \$50.00 |
| 12/01/2007 | Christine Roberts | 35 Yeates Dr New Castle De 19720 | \$50.00 | \$50.00 |
| 12/01/2007 | Joseph Dellaversano Jr. | 4 Gordy Pl New Castle De 19720 | \$600.00 | \$600.00 |
| 12/01/2007 | FOP Lodge 5 | PO Box 652 New Castle De 19720 | \$200.00 | \$200.00 |
| 12/01/2007 | Jay N Sonecha | 207 Vernet Dr Hockessin DE 19707 | \$100.00 | \$100.00 |
| 12/01/2007 | Joseph Dellaversano III | 48 Maureen Way Bear De 19701 | \$100.00 | \$100.00 |
| 12/01/2007 | Vincent P D'anna | 34 Scotch Pine RD Newark De 19711 | \$100.00 | \$100.00 |
| 12/01/2007 | Kevin M Miller | 17 Holly Hills Dr Vridgeton NJ 08302 | \$100.00 | \$100.00 |
| 12/01/2007 | Jaime Romano | 122 Country Woods Bear De 19701 | \$100.00 | \$100.00 |
| 12/01/2007 | Richard F. Seery Jr | 238 Stroud St. Wilm 19805 | \$200.00 | \$200.00 |
| 12/01/2007 | James E. Romano | 4008 Coleridge Rd Wilm DE 19802 | \$50.00 | \$50.00 |
| 12/01/2007 | Edward M Rush Jr | 39 Clipper Court Bear De 19701 | \$100.00 | \$100.00 |
| 12/01/2007 | Charles Sheridan | 105 Hillview Rd New Castle DE19720 | \$50.00 | \$50.00 |
| 12/01/2007 | Joseph A. Cochran Sr. | 1483 Red Lion Rd Bear DE 19701 | \$150.00 | \$150.00 |
| 12/01/2007 | Leon F. Machulski | 1178 Belle Mead De Warminster PA 19874 | \$150.00 | \$150.00 |
| 12/01/2007 | Gary M. Farrar | 19 Daleville Rd Cochranville PA 19330 | \$600.00 | \$600.00 |

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|---|--|---|----------|-------------------|
| 12/01/2007 | Pano Dev LLC | 2044 Sunset Lake Rd Newark DE 19702 | \$600.00 | \$600.00 |
| 12/01/2007 | Ramesh c. Batta Associates PA | 4600 New Linden Hill Rd Wilm DE 19 | \$600.00 | \$600.00 |
| 12/01/2007 | Countermeasures Assessment And Security Experts PLLC | 527 Cooper St. Camden NJ 08102 | \$100.00 | \$100.00 |
| 12/01/2007 | Chatham Bay Construction Services LLC | 200 W Rittenhouse Square Phila PA 19103 | \$250.00 | \$250.00 |
| 12/26/2007 | William A. McMichael III | 129 Washington St. Delaware City 19706 | \$250.00 | \$250.00 |
| 12/26/2007 | Larry Tarabicos | 8 Mill Race Rd Wilm DE 19810 | \$500.00 | \$500.00 |
| 12/26/2007 | Bricklayer & Allied Craftworkers Local 1 PA/DE | 2706 Black Lake Rd Phila PA 19154 | \$600.00 | \$600.00 |
| 12/26/2007 | Carpenter Local 626 PAC | PO Box 151 New Castle De 19720 | \$600.00 | \$600.00 |
| 12/31/2007 | Saul Ewing LLP | 222 Delaware Ave Wilm DE 19899 | \$200.00 | \$200.00 |
| 12/31/2007 | Nancy E. Weldin | PO Box 141 Odessa De 19730 | \$200.00 | \$200.00 |
| TOTAL RECEIPTS IN EXCESS OF \$100 | | | | \$6,600.00 |
| TOTAL RECEIPTS NOT IN EXCESS OF \$100 | | | | \$0.00 |
| GRAND TOTAL RECEIPTS (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2A) | | | | \$6,600.00 |



SCHEDULE B - TOTAL EXPENDITURES

Account Number: ***** Reporting Period: 01/01/2007 12/31/2007
FROM TO

Itemize all expenditures over \$100 for the reporting period. All expenditures to Political Committees must be itemized, regardless of the amount. NOTE: IF you expend funds to the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

EXPENDITURES IN EXCESS OF \$100:

| Date Expended | Payee Name | Payee Mailing Address | Aggregate Amount | Amount Expended |
|--|--|---------------------------------|------------------|-----------------|
| 04/28/2007 | Sandy Conaway Wilm Manor Gardens Civic | PO Box 187 New Castle DE 19720 | \$50.00 | \$50.00 |
| 12/01/2007 | Barbara Bell | 211 Apple Tree Rd Middletown De | \$253.75 | \$253.75 |
| 12/01/2007 | Verizon Wireless | PO Box Wilmington DE 19805 | \$673.73 | \$673.73 |
| TOTAL EXPENDITURES IN EXCESS OF \$100 | | | | \$977.48 |
| TOTAL EXPENDITURES NOT IN EXCESS OF \$100 | | | | \$20.00 |
| GRAND TOTAL EXPENDITURES (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3F) | | | | \$997.48 |



SCHEDULE D-1 - LOANS RECEIVED

Account Number: _____

Reporting Period: _____

01/01/2007

FROM

12/31/2007

TO

All loans in excess of \$50 **RECEIVED DURING THIS REPORTING PERIOD** should be itemized on this schedule. NOTE: These loans must also be listed on Schedule D-2.

LOANS RECEIVED IN EXCESS OF \$50:

| Date Received | Lender | Endorser | Description of Security | Int. Rate | Amount Received |
|---|--------|----------|-------------------------|-----------|-----------------|
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| TOTAL LOANS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2C) | | | | | |



SCHEDULE D-2 - LOANS

Account Number: ***** Reporting Period: 01/01/2007 12/31/2007
FROM TO

All outstanding loans in excess of \$50 must be listed. This includes loans from Lending Institutions, Candidates Personal Funds and Other Contributors.

LOANS IN EXCESS OF \$50:

| Date Rec'd | Lender | Endorser | Description | I n t Rate | Orig. Loan Amt | Payments Made | Balance |
|---|--------|----------|-------------|---------------|----------------|---------------|---------|
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| TOTAL LOANS (TOTAL PAYMENTS MADE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 3H. TOTAL LOAN BALANCE SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCT BALANCE, ITEM 7.) | | | | | | | |



SCHEDULE E - EXPENSE REIMBURSEMENTS

Account Number: *****

Reporting Period:

01/01/2007

FROM

12/31/2007

TO

All expense reimbursements received by you and paid by you must be itemized.

REIMBURSEMENTS RECEIVED (Monies paid to you as reimbursements for expenses you incurred.)

| Date Received | Reimburer | Description of Activity | Activity Date | Total Expense | Reimbursement |
|---|-----------|-------------------------|---------------|---------------|---------------|
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| TOTAL REIMBURSEMENTS RECEIVED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2D.) | | | | | |

REIMBURSEMENTS PAID (Monies paid by you to reimburse others for expenses they incurred.)

| Date Paid | Payee | Description of Activity | Activity Date | Total Expense | Reimbursement |
|---|-------|-------------------------|---------------|---------------|---------------|
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| TOTAL REIMBURSEMENTS PAID (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3I.) | | | | | |



SCHEDULE F - NON-CASH ASSETS

Account Number: _____

Reporting Period: _____

01/01/2007

FROM

12/31/2007

TO

Itemize all non-cash assets owned by the organization including those paid for by the organization, lent to the organization and contributed to the organization.

LIST ALL NON-CASH ASSETS

| Date Received | Description of Asset | Location of Asset (Physical Address) | Value of Asset |
|--|----------------------|--------------------------------------|----------------|
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| TOTAL ASSET VALUE (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 5.) | | | |



SCHEDULE G - ELIMINATION OF ASSETS

Account Number: *****

Reporting Period: 01/01/2007
FROM

12/31/2007
TO

Itemize all non-cash assets disposed of, transferred or sold by the organization during the reporting period.

LIST ALL ELIMINATED ASSETS

| Date Eliminated | Description of Asset | Disposition of Asset | Value Received |
|--|----------------------|----------------------|----------------|
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| TOTAL ASSETS ELIMINATED (TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 6.) | | | |